



RANDOLPH COUNTY SHERIFF'S OFFICE

Sheriff Eddie L. Fairbanks

APPLICANT'S BOOKLET



RANDOLPH COUNTY SHERIFF'S OFFICE

216 Recreation Camp Road Cuthbert, GA 39840



SHERIFF EDDIE L. FAIRBANKS

Jessie Castleberry
Chief Deputy

Captain Anthony Wright
Chief of Division Operations

Major GaBriell Fairbanks
Jail Administrator

Randolph County does not discriminate on the basis of race, age, creed, color, religion, national origin or ancestry, sex, gender, disability, veteran status, genetic information, sexual orientation, gender identity or expression, or pregnancy. The Randolph County Sheriff's Office is an equal opportunity/equal access/affirmative action employer fully committed to achieving a diverse workforce and complies with all Federal and Georgia State laws, regulations, and executive orders regarding non-discrimination and affirmative action.

Thank you for your interest in the Randolph County Sheriff's Office. The Office of the Sheriff is a Constitutional office in Georgia. The Sheriff is charged with service of all documents originating in the Superior Court of the County, maintaining a safe and secure jail, and protection of life and property in the county.

The personnel selected to fill positions within the Sheriff's Office must be ethical, of moral character, and respectful. The process which you will undertake in the application period, will be conducted with fairness, impartially, and with the highest regard to the Office of the Sheriff.

Our mission is:

*To serve with objectiveness, fortitude
and accountability for all the citizens
of Randolph County*

It is the responsibility of the Randolph County Sheriff's Office to conduct a thorough background investigation on each applicant. This investigation includes, but is not limited to:

- Check of the applicant's work history
- Driver's History
- Criminal History
- References
- Interview
- Physical examination/drug Screen

Other requirements of employment:

- Completion of POST training within 6 months of your appointment if not currently certified
- Availability to work any shift, any day, and to be on call for emergent situations that may require short notice of reporting to work.

DISQUALIFIERS FOR APPLICANTS:

IMPORTANT PLEASE READ CAREFULLY: Any attempt to conceal or misrepresent information during the hiring process will result in immediate disqualification of the applicant. In an effort to maintain an equitable standard for hiring applicants for positions, certain standards and guidelines have been established. The following represent a minimum of these standards.

Applicants for positions will not be considered without meeting the minimum criteria outlined below.

- No felony conviction(s) in lifetime.
- No more than two criminal misdemeanor convictions, and no conviction for misdemeanor of an aggravated nature, public order, decency or moral turpitude.
- No convictions for DUI/DWI within the past three years. No more than one conviction of DUI/DWI in a lifetime.
- No more than two convictions for speeding in the past 36 months.
- No drivers license suspension(s) revocation(s) in the past 36 months.
- No restrictions that would prevent applicant from legally or safely operating a vehicle in the past 3 years.
- No convictions for Racing or Reckless Driving in the past 3 years
- No convictions for Leaving the Scene of an Accident, Homicide by Vehicle, Attempting to Elude or Habitual Violator.
- Must have had a valid drivers license for at least 3 years.
- If discharged from a military organization is other than Honorable or medical an explanation should be attached.
- No Convictions for offenses involving the Family Violence Act as defined in O.C.G.A. 19-13-1, to include no active Temporary Protective Orders, (TPO) or Protective Orders.

Information pertaining to disqualifiers surrounding drug use and past drug experimentation is outlined below:

- No Marijuana/Hashish use in the last 3 years and no excessive Marijuana/hashish use beyond the age of 21.
- No use of any drug defined in O.C.G.A. 16-13-25. Schedule I, to include but not limited to Cocaine, heroin or LSD in the last 5 years.
- Cocaine, Heroin, LSD or any Schedule I drug as described in O.C.G.A. 16-13-25 that exceeds one use within five years, two uses within ten years, three uses within fifteen years or any combination of use that exceeds three uses in a lifetime.
- No non-prescribed Steroid usage within the past five years.

If you have any concerns pertaining to other background issues, including past drug use/experimentation, you should discuss it in your initial interview with the Administrator conducting the interview.

The Randolph County Sheriff's Office reserves the right to disqualify any candidate based on the preponderance of evidence.

I HAVE READ AND UNDERSTAND THE ABOVE MENTIONED DISQUALIFIERS:

Applicant Signature _____ Date: _____



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SHERIFF EDDIE L. FAIRBANKS



APPLICATION FOR APPOINTMENT

APPLICANT FULL NAME

First Name: _____ Middle Name: _____ Last Name: _____

DATE SUBMITTED: _____ POSITION APPLIED FOR: _____

You are hereby informed all statements and information submitted may be investigated and are subject to verification. You are also advised that each applicant will be fingerprinted to determine any criminal record and for further identification purposes. Employment drug screening will be required as part of the employment process.

IMPORTANT: THIS APPLICATION FORM MUST BE COMPLETED BY THE APPLICANT IN BLACK INK AND SWORN TO BEFORE A NOTARY PUBLIC.

Upon completing this application the following documents must be attached:

- 1. (1) copy of your High School Diploma or State Equivalency Certificate.
- 2. (1) copy of your driver's license.
- 3. One (1) certified copy of your College Transcript, from an accredited College or University, reflecting the level of education you have completed.
- 4. A copy of your College Diploma; if applicable.
- 5. A copy of your Military Discharge DD-214; if applicable.
- 6. Any record of a name change (excluding marriage); if applicable.
- 7. Two (2) certified copies of your Birth Certificate/ Naturalization Verification; if applicable
- 8. Two (1) copies of your Social Security Card.
- 9. A copy of any certifications from POST or other agency.

Note: Other documents may be required as needed. Failure to follow directions or provide the above documents will only slow down or completely stop your application process. All supporting documents and information in this application must be clear and legible. All applicable areas must be filled out completely to include all names, addresses, and telephone numbers contained herein.

Applicant Signature _____ Date: _____

APPLICATION FOR APPOINTMENT

PERSONAL DATA

First Name: _____ Middle Name: _____ Last Name: _____

Maiden Name: _____ Date of Birth: (mm/dd/yyyy) _____

Home Phone: _____ Cell Phone: _____ Business Phone: _____

Street Address: _____ City: _____

County: _____ State: _____ Zip Code: _____

Social Security Number: _____ Driver's License Number: _____ State: _____

EDUCATION

HIGH SCHOOL

Name	Address	From/To (Yr)	Diploma?
_____	_____	_____	_____
_____	_____	_____	_____

COLLEGE, UNIVERSITY, PROFESSIONAL, VOCATIONAL OR TRADE SCHOOL

Name	Address	From/To (Yr)	Hours/Degree Completed
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GED _____ USAFI _____ (Check if applicable)

Date Administered: _____ State: _____ Certificate Awarded? _____

Name / Address of State Authority Issuing Certificate: _____

SPECIAL SKILLS AND TRAINING

List any additional Skills, Training or Experience related to the position applied for:
(Include computer skills, i.e. Microsoft Office 2000, Excel etc.)

List any language(s), other than English, that you speak fluently:

Are you certified in sign language? _____ Are you certified in lip reading? _____

MILITARY SERVICE

Branch: _____ Dates of Service: _____

Rank/Position: _____ Character of Discharge: _____

(If Character of Discharge is other than Honorable, explanation must be provided in the additional information section of this application)

Reserve or National Guard: _____

Name of Unit: _____ Dates of Service: _____

Address of Unit: _____ Phone Number: _____

Name of Commanding Officer: _____ Phone Number: _____

CRIMINAL HISTORY

Charge	Location (City/ State)	Date Disposition

LAW ENFORCEMENT EMPLOYMENT HISTORY

(Name and Address of Law Enforcement Agency)

Date(s) of Employment (mo/yr) to (mo/yr)

(Official Job Title)

(Name and Address of Law Enforcement Agency)

Date(s) of Employment (mo/yr) to (mo/yr)

(Official Job Title)

(Name and Address of Law Enforcement Agency)

Date(s) of Employment (mo/yr) to (mo/yr)

(Official Job Title)

EMPLOYMENT HISTORY (NON-LAW ENFORCEMENT)

Past Ten Years starting with the most recent. (Include Fax Numbers
Note: For additional employment, list and attach on a separate page

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving}

Employment History Cont.....

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving)

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving)

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving)

Employment History Cont.....

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving)

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving)

(Name and Address of Employer)

(Phone Number)

(Fax Number)

(Dates of Employment mo/yr to mo/yr)

(Official Job Title)

(Salary)

(Supervisor's Name)

(Reason for leaving)

Have you previously applied for employment with the Randolph County Sheriff's Office? YES NO If yes, list the date(s) of application and the position applied for: _____

Have you ever worked for the Randolph County Sheriff's Office? YES NO If yes, list the date(s) of employment and position: _____

Do you object to wearing a uniform? YES NO

Do you object to working shift work? YES NO

Do you have experience with shift work? YES NO

Do any of your relatives work with Randolph County Sheriff's Office? YES NO

If yes, list names and relation: _____

Have you had any arguments concerning job duties / working conditions? YES NO

If yes, explain: _____

Has a supervisor ever reprimanded you for being late for or absent from work? YES NO

If yes, explain: _____

Has a supervisor ever reprimanded or suspended you for misconduct or poor job performance? YES NO

If yes, explain: _____

If prior Law Enforcement, have you ever been the subject of an Internal Affairs Investigation? YES NO

If yes, explain: _____

List the number of times you have been asked to resign or terminated from a job in the last ten (10) years: _____

List the number of times you have resigned after being informed that your employer intended to terminate your job assignment or take disciplinary action against you in the last ten (10) years: _____

List the number of times you have left a job assignment without giving notice in the last ten (10) years: _____

Are you currently employed? If so may we contact your employer? YES NO

If yes may we contact your employer? YES NO

Are you prevented from becoming lawfully employed due to immigration status or VISA status? YES NO

Date available to start work: _____

Which are you seeking: Full-Time Part-time

Persons seeking full time employment must be available for all shifts, hours and understand that as a condition of employment, they may be called upon at any time in an emergency situation to standby or respond to the needs of the Randolph County Sheriff's Office.

If Part Time what days are you available?

If part time are you available to work Day, Evening and Night Shifts? YES NO

If no please explain: _____

P.O.S.T. Certifications

Attach certifications to the applications

Okey Number: _____

Peace Officer number: _____

Corrections Officer: _____

Communications Number: _____

Number of in-service hours in the last year: _____

Specialty Certifications:

Do you have previous security/ corrections/law enforcement experience? If so, where and what position did you hold?

Are you now or have you ever been under investigation by POST? YES NO

If so, are you currently under probation, suspension or revocation of any certification. YES NO

DECLARATION Declaration of Applicant: I hereby certify that there are no willful misrepresentations or falsifications in the foregoing statements and answers to questions. I am aware that should an investigation disclose any such misrepresentation or falsifications, my application will be rejected, or if already employed, my employment may be terminated. I also understand that a failure to answer each question will cause my application to be disqualified.

(Signature)

(Date)

SUBSCRIBED AND DULY SWORN BEFORE ME BY THE ABOVE PERSON

ON THE _____ DAY OF YEAR _____ IN THE COUNTY OF RANDOLPH AND THE STATE OF GEORGIA

NOTARY PUBLIC _____ COMMISSION EXPIRES _____

SEAL

ATTACHMENTS